

# APPLICATION FOR INDIVIDUAL LICENCE (FORM AP.01/IL)



#### FORM AP.01/IL

Regional State.

	Payment Receipt No:  Date:
Applio	cation for Individual Licence (Application to be submitted in triplicates).
1. Se	ervice Options:
	se tick service for which licence is sought. Complete and submit separate application for selected service.
<b>A.</b>	Sales/Installation of Terminal Equipment & Sales of Cables:.
	i. Satellite Telecommunications Terminal Equipment
	ii. Major Network & Switching Equipment, including (i) above and switching
	equipment of up to and more than 600-line capacity.
В.	Internet Services .
C.	Commercial Basic Radio Communications Network .
D.	Interconnect Exchange Services .
Е.	Collocation/Infrastructure Sharing License
F.	Private Network Links (Telephony Services- Fixed/Wireless)
	i. National
	ii Regional: Tier I , Tier II , Tier III , Tier IV , Tier V
G.	Commercial Trunk Radio Network Service

H.

I.

Metropolitan Fibre Cable Network

Capacity Resale (employing Radio/Cable/VSAT): National

#### J. Value Added Service:

- i. Pre-Paid Calling Card
- ii. Call Directory Services
- iii. Special Numbering Services
- iv. Call Centre Services
- v. Content service using Short Code
- vi. Automated Vehicle Tracking Services.
- vii. Aggregator Service

# **K. PNL - Local Exchange Operator Licence** - Description of proposed area of service coverage, viz.

Category A: Urban B. Semi Urban C. Rural

#### L. Non-Commercial Closed User Network

Indicate the category required, viz.

Category A: Small network with 2-Way VHF & UHF radio system only

#### **Category B Large Network:**

- B1. Networks with 2-30 fixed or mobile stations for HF, VHF & UHF
- B2. Networks with 31-50 fixed or mobile stations for HF, VHF and/or UHF Radio-based VSAT Network
- B3. Network services including microwave radio, VSAT and other radio networks exceeding 50 fixed and/or mobile stations .

Category C: Direct International Access (Dedicated closed user international Link

For Embassies & Multilateral Agencies only)

### M. National Long Distance Operator

#### N. Gateway Services

Please tick service for which licence is sought

- i. Full International gateway
- ii. International Data Access (IDA) gateway

#### O. Wholesale Wireless Access Service

P	Unified	A ccess	Services

Please	tick	service(	S	) for	which	licence	is	sought
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- i. Digital Mobile Services
- ii. Fixed Telephony Services
- iii. International Gateway Services
- iv. National Long Distance Services
- v. Regional Long Distance Services

## Q. International Cable Infrastructure and Landing Station License

Please tick service(s) for which licence is sought

i. Submarine Cable ii Terrestrial Cable

#### **R.** INFRACO License

Lagos North Central South West South East South South North West North East

#### 2. Company Information:

2.1 Company Name:				
2.2 Name of Authorized Representative:				
2.3. Address (not Postal)				
2.4.	Telephone/fax Number(s)			
3.	Corporate Profile:			
3.1.	Registered Name of Company			
3.2.	Registration Number			
3.3	Date of Incorporation			

3.4	Add	lress (Head Office)			
3.5.	Tele	ephone/Fax			
3.6	E-m	ail			
<ul><li>3.7</li><li>4.</li><li>4.1</li></ul>	Own	<ul> <li>Current Tax Clearar</li> <li>Brief profile and Pa.</li> <li>(Or passport photog</li> <li>Certified True Copy</li> <li>Certified true Copy</li> </ul>	oration of Articles & Memo of Asso	irectors and Shareholders here the Company is a sha Address ors)	vreholder)
_	S/N I	NAME OF DIRECTORS	ADDRESS	E-MAIL	NATIONALITY
4.2.	Sha	reholders (holding 5% or	more shares):		
5		NAME OF SHAREHOLDERS	ADDRESS	E-MAIL	NATIONALITY

# 5. Experience:

Provide full particulars of the company's experience and expertise, including those of its Partners, Suppliers, Contractors, and Providers of Technical support.

6.	Project Feasibility:				
	A feasibility report is required to accompany your application. This should include details on the following items of information:-				
A. B.	Business and Market Analysis relative to proposed telecommunications undertaking; Detailed Description of the proposed service;				

- Technical layout/systems description;
- C.
- D. Frequency requirements;
- E. Metering and Billing System;
- F. Proposed Grade of Service;
- Proposed Code of Practice/compensation for loss of service; G.
- H. Implementation Schedule and growth plan;
- I. Location & Coverage of service;
- Proposed Community Service Obligation; J.
- K. Ownership, Organisation and Management Structure, including staffing and training;
- Financial projections, including fundamental assumptions, tariff structure, Profit & Loss L. accounts, and cash-flow statements over the licence period, as well as project financing

	arrangements.						
<i>7</i> .	Number of employees (Actual and	d/or Proposed)					
8.	Undertaking:						
	information supplied in this application undertaking that upon grant of the Lie which the Licence is granted. I/We	information supplied in this application form is true in all respects and I/We hereby give an undertaking that upon grant of the Licence, I/We shall abide by the terms and conditions upon which the Licence is granted. I/We accept that my/our Licence may be revoked and the appropriate penalty applied if it is established that I/We have been granted Licence based on					
	Signed	Date					
	Certified Passport Photographs (3	copies) of authorised representative & Company Seal.					